

42.645.00 #15

2. INVENTOR(S) ADDRESS CHANGE (Complete if address change)
INVENTOR(S) NAME
Street Address
City, State and Zip Code

AIR MAIL

☐ Check if additional changes

EXAMINER AND GROUP ART

PAPER TO BE ENTERED

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
104589USMJSA	074-567.000	103	UTILITY	YES	\$645.00	04/02/97

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

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The COMMISSIONER OF PATENTS AND TRADEMARKS is
requiring a check of assistance for the application identified above.

(Applicant Signature) Michael Sofia (Date) April 1/97

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